Pandemic Flu Preparedness Education for the Latino Community

Final Report

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Latino Health Initiative

Vías de la Salud

Health Promoter Program



Montgomery County, Maryland Advanced Practice Center Public Health Emergency Preparedness & Response Program

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Introduction

In FY '08, the Latino Health Initiative (LHI) and its health promoter program *Vías de la Salud* (Pathways to Health, also known as *Vías*), and the Advanced Practice Center (APC) for Public Health Emergency Preparedness of the Montgomery County Department of Health and Human Services (DHHS) pilot tested and produced culturally and linguistically appropriate educational tools designed to improve emergency preparedness and response in the Latino community.

The tools were: 1) a Spanish language training curriculum for lay health promoters, which includes basic information on public health emergencies and actions to prepare for an emergency, outreach techniques, and other key elements of promoter field practice; and 2) a simple, low-literacy resource material for the promoters to complement the curriculum. The tools and their English translations (*Emergency Preparedness in the Latino Community: Training Manual forPromoters* and *Simple Answers to Basic Questions on Emergency Preparedness*) are available on the APC Web site so that other local public health agencies can easily replicate and use them.

The results of the pilot test showed that the promoter-led community education sessions on emergency preparedness were remarkably effective in increasing the Latino community's readiness for emergencies. For example, on the final post-test 100% of participants reported having talked with their families about emergencies and having an emergency plan (compared to 23% and 33% respectively, on the pre-test).³ The Center for Infectious Disease Research and Policy at the University of Minnesota named the materials a "promising practice." An extensive analysis of emergency preparedness communication strategies for at risk populations described the pilot project as one of the few examples of an evaluation of such strategies.⁵

In early FY '09, a discussion was held with the six health promoters who conducted the interventions in FY '08 to identify priority areas for additional communication tools for the Latino community. The promoters suggested that expanding the training curriculum and the educational interventions to include more in-depth information on pandemic flu preparedness would be highly valuable.

The Tool and the Intervention

A Spanish language training module, *Preparación para Gripe Pandémica: Un Módulo de Capacitación para Personas Promotoras* [Preparation for Pandemic Flu: A Training Module for Health Promoters] (Appendix A), was developed to supplement and expand the training module published in 2008 (*Preparación para Emergencias Públicas en la Comunidad Latina: Manual para Capacitación de Personas Promotoras* [Emergency Preparedness in the Latino Community: Training Manual for Promoters]). The new training module outlines how to conduct a five-hour training session for experienced health promoters. The training includes a review of the basic concepts of emergency preparedness as applied to pandemic flu. The focus of the pandemic flu training is preparing promoters to convey a set of "key messages" on pandemic flu preparedness. The key messages correspond to the basic concepts of emergency preparedness addressed in the Training Manual and include:

- Pandemic flu is one kind of public health emergency because it puts many people at risk of death or serious illness.
- You and your family can be prepared for pandemic flu.
- Pandemic flu is an outbreak of a flu virus that spreads throughout the world and infects many people.
- To prepare for pandemic flu, follow the three steps in emergency preparedness.
- Have a conversation with your family about the facts of pandemic flu.
- Talk about good prevention habits.
- Talk about the symptoms of flu.
- Talk about possible changes in daily life that pandemic flu could cause.
- Make a plan: be prepared to stay at home for a week or more.
- Prepare an emergency supply kit: nine essential items and additional items to care for a person with the flu.
- Follow instructions from authorities: listen to the radio or watch TV.
- Stay informed.
- Share this information with your neighbors.

Coincidentally, the promoter training began in early May 2009, a few days after the outbreaks of H1N1 in Mexico became front page news. Thus, the key messages also include information specific to this virus.

In addition to key messages, the training module includes reference materials for the promoters: a handout illustrating correct hand washing technique, *Equipo para el Hogar para la Influenza* [Home supplies for the flu], a simplified adaptation of the APC's *Manual de Preparación para Quedarse en Casa por la Gripe/Influenza* [Stay at Home Flu Guide], developed by the Montgomery County Department of Health and Human Services, and *Una Gripe Fuera de lo Común* [No Ordinary Flu], a comic book developed by Seattle and King County Public Health APC. The appropriate use of Spanish language educational materials developed by the APC for its *Plan to Be Safe Campaign*, (a poster with a takeaway brochure on the nine essential items and a trifold brochure on making an emergency preparedness plan as well as the brochure) *¡Detenga los gérmenes, manténgase sano!* [Stop germs, Stay healthy] is also reinforced in the training.

In May 2009, the six experienced health promoters of the *Vías* program, who conducted the pilot intervention in FY '08, received training employing the pandemic flu preparedness module. Using the same model tested in FY '08, teams of three *Vías* promoters then conducted three interventions (of two sessions each) in neighborhoods with a high concentration of Latinos. A lead health promoter coordinated the identification of intervention sites and made the needed arrangements to conduct the intervention.

The promoters planned and carried out the interventions in two sessions, as shown in Table 1. The first session introduced basic emergency preparedness and the three steps in preparation (per the Training Manual). The second session discussed preparation for pandemic flu, and specifically H1N1.

Table 1: Topics Covered in Promoter-led Interventions on Emergency and Pandemic Flu Preparedness

Session No.	Topics Covered
1	Introduction to session
	Ice breaker
	Public health emergencies and three steps in preparation
	Initiate a conversation
	Make a plan
	Prepare a supply kit with 9 essential items
	Game: the emergency supply box
	Invitation to next session
2	Introduction
	Ice breaker
	What is pandemic flu?
	Preventing flu
	Demonstration of hand washing
	Preparing supplies needed to care for someone with the flu
	Closing

Two interventions were conducted during daytime hours at elementary schools, in partnership with Linkages to Learning, a school-based collaboration including the Montgomery County DHHS, the Montgomery County Public Schools and non-profit, community based service providers, which provides accessible services to at-risk children and their families to improve adjustment to and performance in school, home, and community. A third intervention was held during evening hours at a church. Participants in this intervention included Latino health promoters from two community-based organizations (Community Ministries of Rockville and CASA of Maryland) and from *Vías*. A total of 58 adults attended at least one of the sessions; of these, 34 attended both sessions of an intervention (see Table 2).

Table 2: Schedule and Participants in Promoter-Led Interventions on Emergency and Pandemic Flu Preparedness

Date	Sess ion No.	Time (duration)	Site	No. Adults (Total/ Session)	No. Adults (Both or only 1)	No. Child Care
06/03/09	1	1 h	Rolling Terrace ES	13		10
06/10/09	2	40 min.	Rolling Terrace ES	17		10
			ATTENDING BOTH		12	
			SESSIONS			
			ATTENDING ONLY 1		6	

Date	Sess ion No.	Time (duration)	Site		No. Adults (Total/ Session)	No. Adults (Both or only 1)	No. Child Care
			SESSION				
07/01/09	1	2 h	Wheaton Woods ES	1	13		9
07/02/09	2	2 h	Wheaton Woods ES	1	13		10
			ATTENDING BOTH SESSIONS			10	
			ATTENDING ONLY 1 SESSION			6	
07/06/09	1	2 h	Crusader Lutheran Church		20		8
07/13/09	2	2 h	Crusader Lutheran Church	1	16		1
			ATTENDING BOTH SESSIONS			12	
			ATTENDING ONLY 1 SESSION			12	
TOTAL N	lumbei	Adults Pa	rticipating in One or Two			58	
Sessions							

As established in the pilot project of FY '08, the interventions used culturally competent practices to reduce barriers to information and services such as on-site child care, so that parents could participate readily; healthy snacks for participants and their children; and incentives for participants. The latter included items related to emergency preparedness—flashlights, small first aid kits, medication dispensers, small bottles of hand disinfectant, and travel toothbrushes—as well as t-shirts with the slogan in Spanish "We Latinos prepare ourselves for emergencies." Participants at each session received approximately three incentive items.

Findings

Findings are based on observations of the interventions, promoters' records of the interventions, and a discussion with the promoters following the completion of all interventions.

In general, participants were pleased with and interested in the information they learned and discussed. Many participated actively with comments, questions, and suggestions. Promoters reported that few had thought about emergency preparedness before, and a small number said they were frightened or surprised by the theme. Promoters believe that explaining the three steps in emergency preparedness offers concrete action items for participants and helps to alleviate anxiety. At one intervention site, participants in the first session were so content that they invited additional participants to come to the second session. At the second session of the interventions, some participants reported that they had "done their homework": talked with their families, prepared a plan, and collected essential items.

Participants' comments and questions on emergency preparedness in general included:

• Sometimes preparing for an emergency is useless because when an emergency happens a lot of the time we forget our plan or we forget about the supplies we have prepared.

- It is very difficult to have extra prescription medications available for an emergency: doctors do not want to prescribe them.
- What do we do with our pets if we have to evacuate?
- People with exotic pets should be very careful in an emergency, because the pets might escape and cause a tragedy.
- How long can you keep bottled water before it expires?
- How do you clean up blood in case of an injury?
- How can we find out what the school's emergency preparedness plan is?

Given that the interventions took place in June and July 2009, shortly after the height of public attention to H1N1, participants already had substantial information about it from radio and TV. Many were familiar with the term "H1N1" (rather than swine flu). Nevertheless, this knowledge heightened their interest in the theme. Questions and concerns about H1N1 and pandemic flu preparedness included:

- What is a pandemic?
- Do you have to go to the hospital if you get sick?
- If you can't go to the hospital [because services are overwhelmed], then you will die at home.
- Do young people recover more quickly from H1N1 flu than others?
- Will the H1N1 virus get "worse" [more severe] in the future?
- How do you put on and take off disposable latex gloves?
- How do you dilute bleach so it can be used as a disinfectant?
- People who have health insurance can call their doctor to ask if they need to be seen [in cases of suspected flu.] What do people without health insurance do? Who do they call?
- The reported origins of H1N1 in Mexico have led to cases of discrimination against Latinos, and specifically those of Mexican origin. For example, a woman who was hiring day laborers for yard work insisted that she would not hire "any one from Mexico."

The promoters who conducted the intervention at Rolling Terrace Elementary School had to limit the duration of their sessions to one hour or less (as requested by the school). This was insufficient time to thoroughly cover the topics. The promoters who conducted the other two interventions had two hours for each session, which they said was adequate to completely address the topics, with ample time for questions and answers.

Participants showed much appreciation for the incentives they received, including the educational materials.

Conclusion

The supplementary training module *Preparación para Gripe Pandémica: Un Módulo de Capacitación para Personas Promotoras* should be a useful complement to the *Preparación para Emergencias Públicas en la Comunidad Latina: Manual para Capacitación de Personas Promotoras.* Public health emergency preparedness programs that wish to deliver culturally competent education to the Latino community on pandemic flu preparedness can use the module together with the full training curriculum (Training Manual) to train health promoters.

Based on the lessons learned and the methodology proven to be successful in the pilot test of the training curriculum and the promoter-led interventions, this module and the community interventions can be expected to produce substantial changes in pandemic flu preparedness in the Latino community. As noted in the report of the pilot test, replication and/or adaptation of this module should strive to maintain the features that contributed to success: collaboration with trusted community agencies that serve Latinos; the provision of incentives to participants; ongoing supportive supervision and regular meetings with the promoters; and use of experienced health promoters.⁸

References Cited

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⁶ Public Health—Seattle & King County.

⁷ Adapted by Montgomery County DHHS APC with permission from Seattle and King County APC. http://www.kingcounty.gov/healthservices/health/communicable/stopgerms/posters.aspx

⁸ Emergency Preparedness Education for the Latino Community Conducted by Health Promoters: A Mini Pilot Project. Silver Spring, MD: DHHS, APC and LHI, April 2008.